

Supports Intensity Scale® (SIS®) Satisfaction Survey

Quarterly Report

October 1, 2021 – December 31, 2021

Virginia SIS Satisfaction Survey

Summary

Second-quarter SIS Satisfaction Survey results were very similar to the previous quarter. Ascend/Maximus and Telligen continue to have reduced SIS completion numbers. The two, three, and four-year SIS schedule, which rolled out with the (DD) Waiver regulations (3/31/21), and the delay in FY 2022 DD Waiver slots allocation and assignments are factors in the lower SIS completion numbers. Telligen rolled out, Qualitrac, their SIS scheduling portal. Both vendors now utilize secure portals to gather respondent information from the support coordinators.

Methodology

Both SIS vendors, Maximus and Telligen, provided the SIS Satisfaction Surveys during the scheduling process and, if needed, following the SIS assessment. To increase survey numbers for data collection, assessors remind respondents to complete a survey following the interview. Respondents can enter information directly into the SurveyMonkey website via the link provided or mail completed surveys to DBHDS for entry into SurveyMonkey by the SIS Quality Manager.

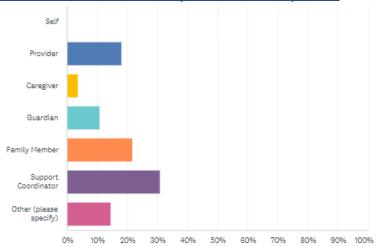
Results

Combined, both vendors completed 261 SIS assessments during the second quarter of FY2022. Fifty-five returned SIS Satisfaction surveys maintained a survey response rate of 21%. Self-respondents, family members, and guardians completed 33% of the surveys collected. For the first time, paid supporters, providers, and support coordinators submitted nearly half (49%) of the surveys. Individuals who identify as caregivers or others accounted for 18% of the total collected. Both paid staff and non-paid supporters identify as caregivers, so the category is isolated for calculation purposes.

SIS Satisfaction Surveys collect feedback, using a Likert scale response, about scheduling, the assessor, and the assessment. Of the surveys received, 47% responded to an open-ended final question, which inquires how the overall assessment process can be improved. Of the responses received, 85% were either positive or completed with N/A. The remaining 15% of responses fall into one of four categories; assertive schedulers, when a SIS can proceed, explanation about ramifications of SIS, and challenges experienced during SIS assessment.

The following charts and tables, directly excerpted from SurveyMonkey, demonstrate the categories of respondents, respondents' level of satisfaction regarding specific elements, length of interview time, and overall satisfaction. Finally, comments/suggestions regarding the process are included.

Respondent relationship to SIS recipient



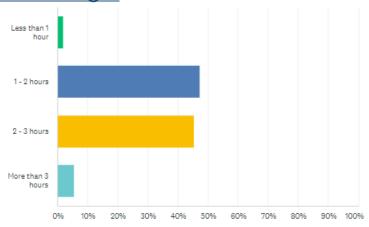
Questions	Self	Provider	Caregiver	Guardian	Family Member	Support Coordinator	Other
Choose one response that best	0	10	2	6	12	17	8
describes your relationship to the Assessed Individual	0%	18%	4%	11%	22%	31%	15%

Of the four surveys that identified respondent relationships of "other," they further identified the relationship as: SC Supervisor, becoming individual's SC/CM(2), Therapeutic Behavior Consultant, Teacher, Program, Behavior Analyst, and case manager.

Satisfaction Survey Questions

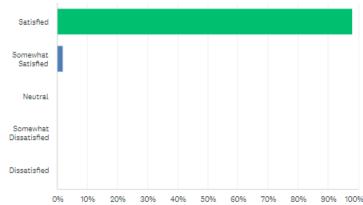
Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The scheduler who made the appointment was friendly and communicated clearly	37	12	6	0	0
	67%	22%	11%	0%	0%
The interview was scheduled at a convenient	42	13	0	0	0
time/date/place	76%	24%	0%	0%	0%
The individual's support team was well	43	12	0	0	0
represented	78%	22%	0%	0%	0%
The assessor was patient, courteous and	52	3	0	0	0
professional	95%	5%	0%	0%	0%
The assessor took enough time to ask the	51	4	0	0	0
questions	93%	7%	0%	0%	0%
The assessor listened to my answers and	51	4	0	0	0
comments	93%	7%	0%	0%	0%
The assessor captured the individuals	51	4	0	0	0
support needs	93%	7%	0%	0%	0%
The assessor made an effort to speak directly	46	9	0	0	0
with the individual	84%	16%	0%	0%	0%

Interview Length



Questions		1-2 hours		More than 3 hours
How long was the interview	1	26	25	3
	2%	47%	45%	5%

Overall Satisfaction



Questions	Satisfied	Somewhat Satisfied	Neutral	Somewhat Dissatisfied	Dissatisfied
Rate your overall satisfaction	54	1	0	0	0
with the assessment	98%	2%	0%	0%	0%

Assessment Process Feedback and DBHDS Response

Schedulers can be overly assertive at times. Particularly with Individuals new to a case manager, the more time given to get to know the Individual and their caregivers/family, the more accurate the assessment will be. Three months with 3-4 contacts is not enough the know the client.

Response: SIS Vendors are provided with a list of SISs to complete based on a priority list from DBHDS. Vendors begin scheduling the SIS when it's approved for a reassessment or due on its regular rotation (within the window to schedule the assessment).

DBHDS has determined support coordinators (SCs) to be qualified SIS respondents after knowing an individual for three months. Examples of job responsibilities unique to the SC:

- meeting the person (virtually or in-person)
- writing/reviewing the Slot Assignment Review Form (SARF)
- helping the individual/family identify the right services and providers, and linking the individual/family to the appropriate services
- writing plans (PCPs), writing quarterlies, and service authorizations (SAs)
- reviewing Part V's, reviewing quarterly reports, reviewing psychological reports, and SAs

While not an all-encompassing list, these examples demonstrate why the SC is a valuable, qualified respondent.

There is no requirement that DD waiver services start before a SIS can occur.

Permission to proceed without a parent (or any other care team member) could be obtained at the beginning of the process to avoid rescheduling if someone does not attend the meeting.

Response: When a SIS date is selected, all qualified respondents agree upon the ultimately confirmed date. The SIS vendor makes a confirmation call or sends an email 24/48 hours before the assessment as a courtesy to remind respondents. If a respondent indicates they cannot

participate during the confirmation contact, there are attempts made to save the SIS date before considering rescheduling the SIS.

We could have appreciated more explanation of what are the ramifications/importance of the assessment for my handicap brother.

Response: The Community Services Board (CSB) assigned Support Coordinator should answer questions about service impact. SIS vendors give a copy of 'The SIS and the PCP' during the scheduling process. The document outlines the SIS process and its interaction with the personcentered planning process. If you cannot locate the copy provided, it is also available on the DBHDS website (www.dbhds.virginia.gov). The SIS Family Friendly Report, sent out by the SC within 15 days of the SIS assessment, also contains a copy of 'The SIS and the PCP' on the back page.

The family is Spanish-speaking. The first attempt to conduct the SIS with the translator provided by the SIS vendor did not go well. For the second SIS attempt, the CSB provided a translator familiar and comfortable to the family.

Response: DBHDS regrets that there was a less than optimal experience with the translator and has addressed this with the vendor. DBHDS relies on the SC, provider, and family present at the SIS assessment to advocate for the individual and report any concerns. In the future, matters such as this that need to be addressed by DBHDS should be reported directly to the appropriate Regional Supports Specialist (RSS). See contact information below.

DBHDS Staff	Primary DBHDS Region	Phone	Email
Lisa Zwecker	1	804 920-3410	lisa.zwecker@dbhds.virginia.gov
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Kira Graves	4	804 807-3580	kira.graves@dbhds.virginia.gov
Brandy Martin	5	804-221-2749	brandy.martin@dbhds.virginia.gov
Kenneth Haines	Regional Supports Manager	804-337-5709	kenneth.haines@dbhds.virginia.gov
Maureen Kennedy	SIS Quality Manager	804-317-1652	maureen.kennedy@dbhds.virginia.gov
SIS Vendor	Primary DBHDS Region	Phone	Email
Ascend/Maximus	3,5	844.968.2747	Ascend-VASIS@maximus.com
Telligen	1, 2, 4	877-563-6972 #3	AssessmentsVirginia@telligen.com



Primary DBHDS Regions for Community Services Boards